

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	dw	68904	9/24/00
O.I.P.E. CLASSIFIER		8	9-29-00
FORMALITY REVIEW	RW	6889	11-07-00
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓	.....	Rejected	N	.....	Non-elected
=	.....	Allowed	I	.....	Interference
—	(Through numeral)...	Canceled	A	.....	Appeal
⊥	.....	Restricted	O	.....	Objected

Claim	Original	Date
Final	Original	
1	11/10/12	
2	✓	✓
3	✓	✓
4	✓	✓
5	✓	✓
6	✓	✓
7	✓	✓
8	✓	✓
9	✓	✓
10	✓	✓
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34	✓	✓
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37	✓	✓
38	✓	✓
39	✓	✓
40	N	N
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49	N	N
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Claim	Date						
Final Original							
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Claim		Date
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**BEST AVAILABLE COPY**

If more than 150 claims or 10 actions  
staple additional sheet here

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